

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2003 8:00 am
Secretary of State

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02-12-2003 90004 035 ****50.00

DOCUMENT # L00000000296	
1. Entity Name BICE COLE LAW FIRM, P.L.	

Principal Place of Business 1333 S.E. 25TH LOOP, SUITE 101 OCALA FL 34471	Mailing Address 1333 S.E. 25TH LOOP, SUITE 101 OCALA FL 34471
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State	4. FEI Number 59-3615680	Applied For ☐ Not Applicable
Zip	Country	Zip	Country



☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent GLENNY, DAVID A 1333 S.E. 25TH LOOP, SUITE 101 OAKHURST PROFESSIONAL PARK OCALA FL 34471	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$50.00	
Make Check Payable to Florida Department of State	
Due By May 1, 2003	

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
BICE, JEAN A 1333 S.E. 25TH LOOP, SUITE 101 OCALA FL 34471	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
COLE, SUSAN J 2801 PONCE DE LEON BLVD., SUITE 550 CORAL GABLES FL 33134	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
GLENNY, DAVID A 1333 S.E. 25TH LOOP, SUITE 101 OCALA FL 34471	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
SANDERS, GARY L 1333 S.E. 25TH LOOP, SUITE 101 OCALA FL 34471	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
REICHERT, SCOTT G 1333 S.E. 25TH LOOP, SUITE 101 OCALA FL 34471	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
Davis, Marcia 15316 NW 140th Street Alachua FL 32617	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: David A. Glenny	Date: 2/10/2003	Daytime Phone #: 352-732-2255
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CR2E083 (10/02)